Supplemental Pay Request Form
EPS and SAAO Employees

Instructions:

Supplemental Pay is compensation paid to an employee above the employee's annual base salary and is appropriate only in limited situations.

Supplemental pay will only be approved for activities with a duration of less than twelve (12) months. Activities or assigned duties extending beyond twelve (12) months must be requested and approved in accordance with other applicable University and UNC System policies and procedures.

The Office of Human Resources is responsible for evaluating additional duties to determine if a pay adjustment is appropriate or if the work described falls into the employee's primary role.

It is the employing unit supervisor's responsibility to assess the appropriateness of the additional duties being assigned.

In accordance with University Policy 501.16, all supplemental pay must be approved prior to the start of the activity. This form must be completed in full; incomplete submissions will not be processed.

Additional pages may be attached as needed.

Requests for **university-sponsored** supplemental pay must be originated by the department requesting the activity. Requests for **externally sponsored** supplemental pay may be originated by the employee.

This form may not be used to request approval for secondary employment or payments not processed through FSU payroll (example: dual employment).

Units are responsible for assessing the appropriateness of the request and confirming alignment with the guidance above prior to submitting for review and approval.

Units should ensure that work is not started prior to the approval of the request.

I. EMPLOYEE INFORMATION

Employee Name		Department	
Employee ID		Position #	
Employee Title		Supervisor Name	
Current Classifcation Type		Base Salary	
FUNDING INFORMATION			
Funding Type	☐ Internal ☐ External	Activity	☐ temporary increase in responsibility ☐ extra duties outside/addition to work hours ☐ external funded sponsored project ☐ Summer school teaching
Funding Sponsor Name		Sponsor Type	Government ☐ Private ☐ Other ☐
Activity Date(s)		Total Project Budget	
Requested Amount			

II. SUPPLEMENTAL PAY INFORMATION

☐ New Request ☐ Continuing Request

Requested Supplemental Pay Type

A. **University Funded Activity**

- ☐ Instructional Activity
- ☐ Internal Grant
- ☐ Administrative Duties (up to one year)
- ☐ One-time Special Payments
- ☐ Other

B. **Externally Sponsored Activity**

- ☐ Government Sponsored Activity
- ☐ Intra-University Consulting (requires an exception)
- ☐ Other Externally Funded Activities

C. Salary Calculation: Non-Faculty Only

Base Salary Amount

Supplemental Pay Request

D. Prior Supplemental Pay

Has the employee received any University-funded supplemental pay in the last twelve months (12)?

Yes ☐ No ☐

If yes, provide the following:

Fund Code	Org Code	Account Code	$ Amount	Dates

Total Amount of **University-funded** Supplemental Pay: $0.00

Amount of Fringe: $0.00

Has the employee received any external-funded supplemental pay in the last twelve months (12)?

Yes ☐ No ☐

If yes, provide the following:

Fund Code	Org Code	Account Code	$ Amount	Dates

Total Amount of **external funded** Supplemental Pay: $0.00

Amount of Fringe: $0.00

III. Justification

A. Detailed description of the proposed activity, including the method used to calculate the requested pay. (Please attach additional pages if necessary.)

B. Describe the relationship of the proposed Activity to the employee's normal job duties.

C. Explain how the Activity will/will not interfere with the employee's current duties and provide details on any approved <u>external</u> professional activities.

All supplemental pay forms must be approved prior to work. If not, the request may be DENIED.

VI. REQUIRED APPROVALS

University Funded Activities

Chair or Unit Head	
Dean (Faculty)	
Provost (Faculty)	
Vice Chancellor	
Human Resources	
Employee	
Chancellor (SAAO)	

Externally Funded Activities

Unit Head	
Dean (Faculty)	
Vice Chancellor	
Contracts and Grants	
Sponsored Programs	
Human Resources	
Employee	
Chancellor (SAAO)	

A Position and Salary Action form (PPA) should be submitted to the Office of Human Resources for final review and approval. This form should be attached to prevent processing delays.